

STATE MEDICAID P&T COMMITTEE MEETING

THURSDAY, July 19, 2012 7:00 a.m. to 8:30 a.m. Cannon Health Building Room 114



MINUTES

Committee Members Present:

Ellie Brownstein, M.D. Lisa Hunt, R.Ph. Bernadette Kiraly, M.D. Roger Martenau, M.D. Kort Delost, R.Ph. Beth Johnson, R.Ph. Julia Ozbolt, M.D.

Dept. of Health/Div. of Health Care Financing Staff Present:

Robyn Seely, Pharm.D.

Bobbi Hansen, CPhT.

University of Utah Drug Information Center Staff Present:

Melissa Archer, Pharm.D.

Other Individuals Present:

Lisa Valaika, Genzyme Kerri Miller, J&J Charissa Anne, J&J Sabrina Aery, BMS Mark Potter, BMS CeeCee Fairly, Genzyme Kim Eggert, Gilead Gary Oderda, UofU Scott Larson, BMS Joe Broughan, BMS

Meeting conducted by: Ellie Brownstein.

- Review and Approval of Minutes: Ellie Brownstein made a motion to approve the March minutes. Roger Martenau seconded the motion. The motion was approved unanimously.
- Housekeeping: Lisa Hunt reported to the committee that the current Preferred Drug List (PDL) is available and became effective July 1, 2012. There were five new classes added to the PDL and after this meeting sedative hypnotics are to be added.
- Drug Utilization Review (DUR) Board update: Robyn Seely addressed the committee. She reported that the DUR board reviewed prior authorization criteria for Synagis. The DUR board moved to mirror the recommended criteria of the American Academy of Pediatrics found in the Redbook. She also reported that the DUR board will be looking at QT elongating drugs and following up on dose consolidation requirements.
- 4 **Sedative Hypnotics (for procedural sedation)**: Melissa Archer provided an overview of the sedative hypnotics indicated for procedural sedation. She reported that they only reviewed benzodiazepines; barbiturates did not show any utilization in the past 3 years so

they were not reviewed.

Benzodiazepines: chlordiazepoxide (Lirium, others), diazepam (Valium, others), lorazepam (Ativan), midazolam (Versed).

The University of Utah recommends preferring at least 1 agent in the class, they suggest midazolam due to its pharmacokinetic data they also suggests lorazepam and diazepam due to additional indications.

Kort Delost noted that there may be different indications depending on the procedure being performed. Ellie Brownstein questioned how often these medications are being used in the providers' office. Bernadette Kiraly stated that procedures such as in office vasectomies may require in office use of these medications. Lisa Hunt clarified that in that instance the patient would be filling the prescription at the outpatient pharmacy, rather than the provider dispensing it.

Kort Delost states that midazolam appears to be the best option for in-and-out sedation, the effects clear quickly. Bernadette Kiraly added that although midazolam requires closer monitoring, if it is done in office that monitoring would be happening.

Ellie Brownstein says that there are also other indications (for things like lorazepam), such as anxiety. Kort Delost questioned if the committee should be considering these 'other' indications. Lisa Hunt pointed out that anytime a drug has multiple uses and is placed on the PDL it is either preferred or non-preferred for all indications.

Kort Delost made a motion to include midazolam, lorazepam and diazepam in both and oral and injectable form, motion was not approved and further discussion ensued.

Beth Johnson questioned how the class can be separated by indication. Lisa Hunt stated that because a diagnosis is not required that coverage cannot be separated by indication; if a drug is non-preferred on the PDL then it requires prior authorization for all indications.

Bernadette Kiraly asked if it was necessary to include chlordiazepoxide, due to low utilization. Beth Johnson asked what specifically the legislation wants considered for the PDL. Lisa Hunt reported that they are to look at drugs with indications that classify them as sedative hypnotics (although many have multiple other indications too). She also pointed out that many of the classes already included on the PDL have drugs with multiple indications.

Robyn Seely asked which sedative hypnotics were approved in May 2012 (when the first group of sedative hypnotics was reviewed). A review of May 2012 meeting motions was done.

More discussion was had regarding the multiple indications of each of the drugs in this class review. Based off the many indications for each several committee members expressed a need to cover all four drugs.

Other States: Lisa Hunt provided data from other states PDLs for consideration. May 2012 P&T Committee Meeting

Public Comment: none.

<u>Board Actions</u>: Kort Delost made a motion that all agents are equally safe and efficacious (with the exception that midazolam must be monitored closely). Bernadette Kiraly seconded the motion. The motion was approved unanimously.

Kort Delost made a motion to include chlordiazepoxide, diazepam, lorazepam and midazolam due to multiple indications and benefits. Ellie Brownstein seconded the motion. The motion was approved unanimously.

Next meeting information: Lisa Hunt urged the committee to consider how they would like to approach the upcoming class (anti-neoplastics). The other states have handled this class differently. One approach is to prefer all the drugs in the class. Another would be to treat this class as voluntary on the PDL; although a medication may be non-preferred it would not require a prior authorization. Alternatively, a third approach is to treat the class the same as any other class, that is non-preferred drugs still require prior authorization.

Next Meeting Set for Thursday, August 16 – Anti-Neoplastics (Urinary-Tract Protective Agents & Mitotic Inhibitors)

Meeting Adjourned.

Minutes prepared by Bobbi Hansen.